

## **EMPLOYMENT APPLICATION**

## **An Equal Opportunity Employer**

Specific position applying for:	Desired Salary:						
Additional positions applying for:							
Are you seeking: ☐ Full-time ☐ Part-time ☐ Temporary/Seasonal employment? Date available for work:							
Last Name First Name	Middle Name	Social Security Number					
Present Street Address	City	State Zip Code					
Home Telephone	Work Telephone	E-Mail (optional)					
If under 18 years of age, can you provide re	equired proof of your eligibility to wo	ork? Yes 🗆 No 🗆					
Are you legally eligible to work in the U.S.?	(Verification will be required upon I	hire) Yes □ No □					
Have you ever served in the Armed Forces	? Yes ☐ No ☐ Date of Serv	vice: to					
Type of Discharge:							
Are you currently a City employee? Yes   Have you ever been employed by the City?  Department  Are you related by blood or marriage to any Yes   No   Name	Yes ☐ No ☐ If yes, list the de Position  Position  current City of College Station em	epartment(s) and dates below:					
Have you been convicted of a DUI or DWI within the past 3 years?  Yes No No Is your license presently restricted, suspended or revoked?  If yes, give the reason: date it began, and date ended (or will end)  Do you have charges pending or have you admitted guilt or been found guilty, including Deferred Adjudication, of committing a felony or Class A or B misdemeanor? Note: Include offenses for which probation was granted, exclude minor traffic violations, but include DUI/DWI. Yes No If yes, explain in the space provided.  Date Offense County & State of Offense Disposition  IMPORTANT! A conviction or deferred adjudication record will not be an absolute to bar employment. Factors such as nature of offense, date and relationship between							

	EDUC	CATION		
List Name and Address	of Schools:		Number of Years Completed	Diploma/ Degree/
High School or GED:				Certificate
Trigit Scribbi bi GED.				
College or University:				
Subjects Studied:				
		_		
Subjects Studied:				
JOB	RELATED SKILLS AND/OR	LICENSES AND CERTIF	ICATIONS	
What skills or additional tr	aining do you have that are related	to the job for which you are ap	plying?	
Typing (wpm)	Ten-key by	touch		
Computer software	· · · · · · · · · · · · · · · · · · ·			
Technical/Skilled craft (me	echanic, electrician, engineering, et	c.)		
Maintenance skills (paintir	ng, custodial, grounds, etc.)			
Supervisory/Management	Skills			
Customer Service/Interpe	rsonal Relations			
Other special skills				
Bilingual Skills <u>Language</u>	<u>Speak</u>	Read		
	□ Fluent □ Good □ Fair	☐ Fluent ☐ Good ☐ Fair		
	□ Fluent □ Good □ Fair	☐ Fluent ☐ Good ☐ Fair		
	□ Fluent □ Good □ Fair	☐ Fluent ☐ Good ☐ Fair	☐ Fluent ☐ G	Good □ Fair
NOT	E: Applicants may be required to p	rovide copies of licenses and co	ertifications.	
	usiness or civic activities and offices , national origin, sex, age, disability		itions and membe	rships whic
Driver's License Number		License issued by the Sta	te of:	
	ou have? Commercial (CDL) Clas	<del>-</del>		

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EMPLOYMENT HISTORY  List names of employers in consecutive order with present or last employer listed first.					
Name of Employer	Supervisor(s) Name/Title				
Address	Employed From (mo/yr) / To (mo/yr) /				
City, State, Zip Code	May we contact this employer? Yes □ No □				
Telephone	may no contact time compression.				
Position Title	Reason for Leaving				
Job Duties					
What did/do you like the most about this position?, the least?					
Name of Employer	Supervisor(s) Name/Title				
Address	Employed From (mo/yr) / To (mo/yr) /				
City, State, Zip Code	May we contact this employer? Yes □ No □				
Telephone					
PositionTitle	Reason for Leaving				
Job Duties					
What did/do you like the most about this position?, the least?					
Name of Employer	Supervisor(s) Name/Title				
Address	Employed From (mo/yr) / To (mo/yr) /				
City, State, Zip Code	May we contact this employer? Yes □ No □				
Telephone					
Position Title	Reason for Leaving				
Job Duties					
What did/do you like the most about this position?	, the least?				
Comments: Include explanation of any gaps in employment:					
Have you ever been discharged from any employment or asked to resign in lieu of discharge? Yes ☐ No ☐ If yes, specify the circumstances:					
	<del></del>				

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Have you worked or attended school under any other names? Yes □ No □							
If yes, give names:							
EMPLOYMENT, PROFESSIONAL, AND/OR ACADEMIC REFERENCES							
Name Address	Telepho	ne Type of A	Acquaintance	Years Known			
	SOURCE OF R	EFERRAL					
How did you find out about us/this position?  ☐ Walk-in ☐ City Employee	☐ Job Line	☐ Cable Television	☐ Internet \	Web Page			
☐ Newspaper		☐ Radio		<del></del>			
☐ Professional Journal		☐ Job Fair					
☐ Recruiting Drive		Other					
PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING  By my signature below, I certify, authorize or acknowledge:  That all the information provided by me in connection with my application, whether on this document or on any attachment, is complete, true and correct. I know the City will rely upon this information in making a decision to hire me. Consequently, I further understand that any misstatement, falsification, or omission of information will void my application and prevent any further processing. If the City obtains such information after I am hired, I will be subject to termination from my employment with the City.  For the purpose of verification, any persons, organizations, and educational institutions listed on this application or any attachment may give any and all requested information concerning my previous employment, education, experience or other information to the City.  That as a condition of employment with the City, I must successfully pass a thorough background investigation, which may include a criminal history check, driving record verification, etc.  That as a condition of employment with the City, I may be required to submit to a medical examination and/or drug test by a physician or laboratory selected by and at the expense of the City at such time as is required.  That any offer of employment with the City of College Station is at-will and does not constitute a promise or guarantee that my employment will continue for any specified period of time.  That any employment offer will be at the continuing discretion of the department directors, division managers and supervisors concerned. I am aware that this application and all attachments will become the property of the City and will become a part of my personnel file if I am accepted for employment.							
Please submit completed application in person, online, or by fax to:  City of College Station  Human Resources Department  1101 Texas Ave.  College Station, TX 77842  Online: www.ci.college-station.tx.us/jobline/cstx.htm  Fax: (979) 764-3800							

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